

The real solution here is liberating the private sector. The real solution is to implement policies that will increase wages for everyone instead of pursuing policies that essentially seek to distribute slices of a smaller pie to some. Of course, making a turn toward authentic job creation might make the left mad, but it is the only way to get the gears of our economy working again and college graduates off their parents' couches and onto a path of earned success.

Maybe the President will show some change of heart in Minnesota today. Maybe he will recognize, for instance, that killing thousands of high-tech jobs in the medical device industry is not worth the pain it is causing. Who knows? Who knows? I sure hope so because if you have entered the sixth year of trying to fix an economy and you are still talking about emergency unemployment benefits, it is time to recognize that your policies have not worked for the middle class. It is time for a fresh start.

Before I go, I would like to highlight one more dividing line between the dreams of the left and the well-being of our constituents. It is a topic I spoke about yesterday; that is, Medicare Advantage.

As I asked then: Why would the administration want to raid a program that is working, such as Medicare Advantage, to fund a program that does not work, such as ObamaCare? Why would Senate Democrats vote time and time again to do that? They must have known that taking \$300 billion from Medicare Advantage to fund ObamaCare would have real-world impacts on seniors, such as losing choices and coverage and doctors they now enjoy. It is not fair. It is not right. Several of my colleagues will be coming to the floor to speak more about this issue this morning.

I yield the floor.

RESERVATION OF LEADER TIME

The ACTING PRESIDENT pro tempore. Under the previous order, the leadership time is reserved.

MORNING BUSINESS

The ACTING PRESIDENT pro tempore. Under the previous order, the Senate will be in a period of morning business for 2 hours, with Senators permitted to speak therein for up to 10 minutes each, with the time equally divided and controlled between the two leaders or their designees, with the Republicans controlling the first half.

The ACTING PRESIDENT pro tempore. The Senator from Nebraska.

HEALTH CARE

Mr. JOHANNIS. Yesterday I had the opportunity to come to the floor of the Senate and talk about ObamaCare's broken promises for our Nation's seniors.

The administration's most recent proposal to significantly cut Medicare Advantage is certainly not news to my colleagues on the floor today. During the health care debate, we warned over and over again that cutting \$½ trillion from Medicare to fund ObamaCare would have disastrous consequences and that it certainly would not strengthen Medicare. The law drains \$308 billion from a very well-received Medicare Advantage Program.

The stories from Nebraskans illustrate how these cuts are hurting senior citizens. I heard from a couple in Carney, NE. They wrote to me saying that the Medicare Advantage plan they had for several years was something they liked. It was a plan that worked for them, but that plan, because of ObamaCare, was cancelled. She went on to say to me that another plan was going to cost more money and higher rates were coming for them.

She said: "I have not been shy about telling people that we lost our insurance plan thanks to ObamaCare!"

I could add to that that she has lost her insurance plan—and thousands of others, tens of thousands of others across the United States—because of the votes of the majority and the President.

A Nebraskan from Hastings shared that her Medicare Advantage plan was discontinued and her new Medicare Advantage plan option was, get this, 357 percent more expensive. Is that fair treatment to that senior citizen?

When ObamaCare was passed, we tried to get amendments done that if there were any savings in Medicare, it would go back to Medicare to protect the system. That was voted down by the majority.

What we ended with is a situation where those funds were pulled out of Medicare and used to finance ObamaCare. For millions of Americans and about 35,000 Nebraskans who rely upon Medicare Advantage, this law has not delivered on its promises.

As I have said over and over since this debate began, I have been committed to ensuring that Medicare is sustainable for decades to come, not only for the current generation but for our children and our grandchildren. The health care law does not accomplish this goal, and I believe strongly it needs to be repealed.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Wyoming.

Mr. BARRASSO. I come to the floor also to talk about a letter I got from Wyoming from a constituent, Traci, who lives in Rock Springs, WY. She is very concerned about the health care law. It is interesting because she writes after hearing on the news last week a clip of Secretary Sebelius. It is a clip where Secretary Sebelius claims there is no indication that the ACA is responsible for any job loss.

Traci in Rock Springs, WY, sees Secretary Sebelius on television and wants to let the country know—and I am

doing that for Traci today—that the Secretary is wrong.

Traci says: "My life is a prime example. Let me explain just how the ACA has destroyed my life."

The quote she is referencing is Secretary Sebelius last week said: "There is absolutely no evidence, and every economist will tell you this, that there is any job loss related to the Affordable Care Act."

It almost seems like a deliberate deception, an effort by the Secretary to mislead the American people, saying: Who are you going to believe, Secretary Sebelius or your own two eyes when you see what is happening in your own communities?

That is why Traci wrote to me from Rock Springs, WY.

Traci said she works full time. She also maintains a number of part-time jobs. She has a master's degree.

She says: "Once the ACA was passed, I saw the writing on the wall, and so did the companies I work for."

Isn't it interesting that Traci in Rock Springs, WY, could see the writing on the wall, the companies she worked for could see the writing on the wall, and yet the Democrats in this body who voted for this law couldn't see the writing on the wall.

She said she had health insurance and that these companies wouldn't have had to provide her with anything because she had insurance—wouldn't have had to provide her with anything. But they didn't know who might and might not have insurance, and they weren't taking the chance that they would have to offer health care to a large number of people. So what these companies basically did, she said, was hire a specific number of individuals full time and thus those of us who remained part-time employees have been cut way back. This is obviously impacting her wages, her take-home pay, the things that matter to her, and it seems that Democrats, including Secretary Sebelius, couldn't care less.

It was interesting. I came to the floor yesterday with an article from the New York Times last week about all of these public jobs, people working for public schools, people working for community colleges, sanitation workers for communities, counties—all of these people having their hours cut, their take-home pay cut, their wages cut, and it is because of the health care law, specifically because of the health care law.

Traci continues:

I can't believe in a country my grandfather came to and lived the American dream is actually actively trying to prevent me from being able to do the work I want to do. The kind of work I am good at. The kind of work that others benefit from. What was the comment last week about how I am being liberated from my job to do what I truly want.

It is astonishing. What she says is: I was doing what I truly wanted.

But yet, according to the Democrats, according to NANCY PELOSI, the former Speaker of the House, she is now being

liberated from the job to do what she truly wants to do—when we have somebody with a master's degree, someone who loves to teach, and not being able to do what she truly wants to do.

Continuing:

And now this government is actually preventing me from what I want to do, doing what I like to do, doing what I am meant to do.

This is a woman in Wyoming doing what she wants to do, what she likes to do, what she wants to do, and was meant to do as a teacher—because of this health care law.

It is not only in Wyoming. I read a story on the floor yesterday of a school district in Connecticut, Meriden, CT, where the superintendent, who is on a national board of school districts, said: What am I supposed to do? If I am going to provide by law all of these part-time workers—who are working over 31 hours—health insurance, what I am going to have to do is fire five reading teachers. How can I make that decision and that tradeoff?

Instead, they cut their hours to less than 30 hours a week, but yet Kathleen Sebelius says there is absolutely no evidence relating to job loss in the Affordable Care Act.

My friend Traci writes: “So Obama care—has cost me a lot of jobs, has cost me about half of my income.”

When the President of the United States is saying we need to raise the minimum wage, why is the President of the United States ignoring Traci, her income, her wages, and her take-home pay? Why is his health care law making her life worse?

She said: “So Obama care—has cost me a lot of jobs, has cost me about half of my income.”

She continues:

And by the way I was one of those taxpayers that don't have any deductions generally to take other than my mortgage, so when you used to get a lot of taxes from me, by decreasing my income in half, your tax revenue is decreasing in half as well. So next time Sec. Sebelius claims that there are no indications of any job loss, you can tell her that I have lost multiple jobs and I am not being “liberated.”

That is what the American people are facing. That is what the President of the United States denies every day when he refuses to give voice to the suffering that his health care law is causing all across this country in all 50 States. It is time that we work together, get solutions for the health care needs of this country, and not continue under what is happening with the President's health care law—which, case after case after case, is not yet giving the American people what he promised them and is giving them a lot worse. It is hurting their lives, it is hurting their health, and it is hurting their take-home pay.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Republican whip.

Mr. CORNYN. I thank the Senator from Wyoming, who is one of the most knowledgeable, eloquent Members of

our side of the aisle or in this Chamber on the subject of health care law. As a former practicing orthopedic surgeon, he knows the subject better than almost anyone I know.

But we are on the floor today to talk about the cuts to the only real choice that seniors have when it comes to their health care coverage under Medicare. There are basically two choices. One is called Medicare Advantage, which I will talk more about in a minute, and the other is Medicare, traditional Medicare, which is a fee-for-service program that many people find is less advantageous to them than Medicare Advantage.

Close to 16 million people currently receive health care benefits through Medicare Advantage—about 1 million of them in Texas, the State I am honored to represent. Of course, they represent roughly 30 percent of all Medicare beneficiaries.

Why would somebody choose Medicare Advantage rather than traditional Medicare? Because it gives a lot more flexibility and greater patient choice. It actually delivers better results than traditional Medicare. It has been one of the main sources of innovation when it comes to health care, producing better outcomes for seniors under Medicare. Medicare Advantage is the primary driver.

Unfortunately, the President's health care law, known as the Affordable Care Act, or ObamaCare, slashed about \$300 billion from Medicare Advantage. My constituents are already going to start to see premium increases to their Medicare Advantage policies. Many of them will have to then question whether they can afford that, whether they will drop Medicare Advantage, lose the choices, the flexibility, the innovation that goes along with it, and end up basically turning to traditional Medicare fee-for-service.

In Texas, about two out of every three doctors will see a new Medicare patient because it actually reimburses physicians at a lower rate than regular health insurance does, so many doctors have found that they have to limit their practice, much as they have under Medicaid as well.

But we know that the \$300 billion that has been taken from Medicare Advantage, and these seniors—who rely on it to shore up the Affordable Care Act or ObamaCare—know that the news on ObamaCare continues to unwind and bring us bad news almost every day. Not only have millions of people lost their existing health care coverage, even though they were promised by the President of the United States that if you like it, you can keep it—I lost count of how many times the President made that statement, but I think it is somewhere in the high twenties. Of course, now we are finding out that more and more people are having to pay higher premiums as a result of ObamaCare.

Another promise the President made is he said that a family of four would

see a reduction of \$2,500 in their average premiums, but they are seeing their premiums go up. Indeed, on Friday, in a late-afternoon news dump—that has become a new art form for the administration, they dump news on Friday afternoon and hope nobody notices, or it won't be covered—we learned that roughly two-thirds of the people who work for small businesses will see an increase in their premiums as a result of ObamaCare, some 11 million small business employees.

The people who are concerned about Medicare Advantage aren't only on this side of the aisle. In fact, we have had bipartisan accolades for Medicare Advantage, called a great success by both Senators from New York, for example, and the chairman of the Democratic Senatorial Campaign Committee from Colorado. They recently joined me, along with a couple of dozen colleagues, to urge CMS Administrator Marilyn Tavenner to “maintain payment levels that will allow [Medicare Advantage] beneficiaries to be protected from disruptive changes in 2015.”

This bipartisan support for this important choice for seniors, known as Medicare Advantage, is in real jeopardy as they are going to see as a result a \$300 billion cut from Medicare Advantage in order to shore up this failing experiment in big government known as ObamaCare.

People's existing health care arrangements are in serious jeopardy and they are concerned and they are calling and writing us and wondering what we are going to do. Unfortunately, those calls and letters seem to fall on deaf ears, as far as the President and the people who voted for this bill are concerned. The American people have seen they are whistling past the graveyard and hoping that what will likely happen in November—which will finally be the day of electoral accountability—is that their voices will actually be heard.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Nebraska.

Mrs. FISCHER. Mr. President, I rise to speak on behalf of the 35,000 Nebraska senior citizens who are enrolled in Medicare Advantage. These Nebraskans are going to face fewer choices, increased premiums, and decreased benefits because of ObamaCare's latest cuts. I am especially concerned with how these cuts will impact rural Nebraskans who may be forced out of the program altogether due to the lack of available plans.

The administration has already taken over \$700 billion from Medicare to prop up ObamaCare, and \$308 billion of that is from the popular Medicare Advantage Program to fund this failed health care experiment. These cuts to health services for seniors only hasten the demise of this successful program, a program that has improved the lives of millions of seniors across this great country. Medicare Advantage works for them.

Too many promises have already been made and broken, so let's not break another promise to America's seniors.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Indiana.

Mr. COATS. Mr. President, I think nearly every Member of this body shares the goal of increasing access to affordable health insurance and helping American families receive the best coverage to meet their specific needs. So the question before us today—and the question before us this entire Congress—is how are these goals being achieved. This has been an issue we have been debating since 2010, when ObamaCare was signed into law.

Based on the extraordinary feedback from Hoosiers, regardless of party affiliation or ideology, the overwhelming number of messages that have been sent to my office, and that I have heard while traveling across the State of Indiana, suggest that the Affordable Care Act has turned out to be a dismal failure. It is hurting more families than it is helping.

To top it all off, the administration, late last Friday afternoon once again cut one of the most popular programs available to seniors—Medicare Advantage. We have 230,000 Hoosiers enrolled in Medicare Advantage plans who could be told major cuts will be made to their plans in order to pay for ObamaCare.

What an irony. We pass a program to provide health care coverage for senior citizens. They sign up for the program. They make the choice on their own to pay higher costs for Medicare Advantage so they get better coverage, and the administration simply says: We need to rebalance things so we are going to do everything we possibly can to make it more difficult and more expensive. This was their choice, but the administration is saying: We are going to make it our choice that this program is going to be reduced and much harder to engage in.

Consider what is happening. This administration is cutting billions of dollars from Medicare Advantage—an extremely popular program not just in my State but across this country—to pay for ObamaCare, which is extremely unpopular. So the administration takes a plan that works, a plan that people support, because it is their choice and they are willing to pay for it, and the administration says: No, we are going to take that away from you so we can cover the cost for a plan that is not popular. This is the irony of ironies, particularly in terms of meeting the goal that I think all of us want to meet.

So we have yet another broken promise. The President so famously said over and over again: If you like your plan, you can keep it. If you make a choice as to how you want to be covered, what benefits you want to have, what premium you want to pay, you can keep that—but now he is saying,

well, no, effectively, you can't keep it because we are going to take that away from you.

It is no wonder I receive tens of thousands of pieces of mail and phone calls from Hoosiers all across my State saying: I got duped here. I got lured into something that supposedly was going to make medical care less costly; that I would be able to keep my doctor, I would be able to stay with my hospital, I would be able to keep the benefits in the plan I chose, and now I am being told, no, none of that is going to work.

As was just stated by Senator CORNYN of Texas, there is a bipartisan effort underway to send a message to the President. It urges the President to preserve Medicare Advantage and the incentives to join it. I know the President doesn't want to listen to Republicans and have them tell him what is happening in their States, what their suggestions are as to what to do to fix this disaster of a health care plan, but maybe he should listen to Members of his own party. There is a significant number of Democrats who have said: We don't want these cuts to be imposed on Medicare Advantage. We don't want to go home and tell our constituents they can no longer have their Medicare Advantage plan.

So if the President doesn't want to listen to us, I fully understand that. He has made that very clear. But perhaps he should listen to Members of his own party and listen to what they are saying. Let's give people the ability to make choices and keep the plan they have chosen and not have it taken away by a bureaucracy that simply makes decisions for them.

With that, I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Utah.

Mr. HATCH. Mr. President, I compliment my colleagues who have been talking about Medicare Advantage today. It is amazing to me that this administration will take money from Medicare Advantage—a program people love and that works well, where they can have their own doctors and their own health care providers—and put it into ObamaCare—a program that is not working and people are not happy with—and we wind up with a lot of dissatisfied people in this country and with good reason for their dissatisfaction.

So I rise to join my colleagues in speaking out against the harm ObamaCare is already causing to seniors throughout the country who rely on Medicare Advantage. I have heard from many seniors in my home State of Utah who are worried about the impact further cuts to the Medicare Advantage Program could have on their personal health care.

For example, James and Maureen of Spanish Fork, UT, sent a letter describing how they have been personally affected by the hundreds of billions of dollars taken from Medicare Advantage to pay for ObamaCare—to take money from a program that works,

that people are happy with, that they pay for, and put it into ObamaCare where it doesn't work, they are not happy with it, and it even costs the government more money.

James and Maureen were informed some time ago that their current doctors and most providers in their area will no longer be covered as a part of their plan's network. In Maureen's words:

If further funding is taken from the Advantage programs, more and more providers will stop accepting these plans. Where will we go to seek medical treatment?

Maureen also said that similar to many other seniors, she and her husband "worry about what will be next."

These are common stories. Seniors throughout Utah and the Nation are seeing their health care options dwindle because President Obama and the Democrats in Congress raided Medicare Advantage to pay for their misguided ObamaCare and what they call their health care law.

We all remember when the President promised under ObamaCare if you like your doctor, you can keep your doctor. Yet because of the law's cuts to Medicare Advantage, people such as James and Maureen are being forced to find new doctors and health care providers. As each day passes, fewer and fewer options are available to them. This is just another example of broken promises that came part and parcel with ObamaCare.

On top of the problems with Medicare Advantage, a new report issued late last week from the Chief Actuary from the Centers for Medicare & Medicaid Services had even more troubling news. Buried in the report—which was 2 years late, by the way—is the confirmation that ObamaCare will raise insurance premiums for 11 million employees of small businesses.

You heard that right. The Obama administration's own actuary found that under the President's health care law 11 million workers will see their premiums rise. As I said, this report was 2 years late, and it is no wonder why the administration sat on it for as long as they did.

This is just the latest in a long line of bad data we have seen about this misguided law. Yet the administration refuses to step away from its talking points and acknowledge the truth—that the health care law is fundamentally flawed and is not working as promised.

All of the problems we are seeing are confirming over and over that the best path forward would be to repeal ObamaCare and replace it with patient-focused, commonsense reforms that will actually lower costs and expand options for the American people. I hope eventually that is the path we take.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from South Dakota.

Mr. THUNE. Mr. President, in July of 2009, President Obama said: "If you like your doctor, you keep your doctor."

If you like your current insurance, you keep that insurance. Period, end of story." Then later, in September of 2009, the President said: "Now these steps [ObamaCare] will ensure that you—America's seniors—get the benefits you've been promised."

Well, Mr. President, last Friday we saw yet another group of Americans fall victim to the Democrats' broken ObamaCare promises, and this time it was America's seniors. ObamaCare cuts of over \$300 billion to Medicare Advantage are already hurting seniors who rely on that popular program for their health care needs. More than 15 million seniors, close to about 30 percent of all Medicare recipients, are enrolled in Medicare Advantage plans.

The Wall Street Journal reports that approximately one out of every two new Medicare enrollees chooses Medicare Advantage. Seniors often choose Medicare Advantage because it is a more comprehensive and cohesive way to get health care services and it offers seniors the chance to pick a plan that is right for them instead of a one-size-fits-all approach picked for them by Washington, DC.

The administration's additional cuts to Medicare Advantage announced last week will make it even harder for America's seniors to keep their benefits, plan, and preferred doctor. The Kaiser Family Foundation estimates that more than one-half million seniors will lose their current plans in 2014, which is a direct violation of the President's promise.

This administration's cut to Medicare Advantage in order to try to pay for ObamaCare is having real-world impacts on people throughout the country.

A constituent of mine, Cheryl from Box Elder, SD, wrote to me this past week and said:

My husband and I both pay for a Medicare Advantage Plan. . . . We have already had our original policy cancelled because of ObamaCare. And our prescription costs have increased for the same reason. So I am practically begging you to do all you can to keep our Advantage Plan from being cut.

Every Senator who voted for this train wreck owes America's seniors such as Cheryl an explanation for these Medicare cuts, which are already resulting in canceled plans, higher costs, and reduced access to the doctors they had and liked.

When the ObamaCare legislation was being debated and these proposed cuts to Medicare were being advanced, many of us said this would be a big mistake because what they were essentially doing was cutting Medicare—particularly Medicare Advantage, which is especially helpful to a lot of seniors across this country and which is working out there—taking the savings and then using them to pay for a whole new entitlement program.

At the time we talked about this—and, of course, because of the weird conventions used in trust fund accounting here in Washington, the hun-

dreds of billions of dollars that were cut from Medicare were not only then used to pay for this new entitlement program, ObamaCare, but were also credited to the Medicare trust fund. Their argument was that they were preserving and extending the lifespan of Medicare, and at the same time they were using these savings from the cuts coming in Medicare Advantage to pay for a whole new entitlement program. I think for most Americans this would be spending the same money twice. It would be double-counting revenue.

Essentially what they are saying is this: We are going to put an IOU into the Medicare trust fund which at some point in the future we are going to have to redeem to pay benefits, and this is going to require us to borrow more money.

It is intergovernmental debt. We talk about publicly held debt, which is debt held by the public, but there is also intergovernmental debt, which adds to the total debt burden we place on American citizens and which is debt that we are going to have to pay back in the future.

Essentially, all they have done is put a promissory note—an IOU—into the trust fund. At some point in the future when we need to be able to pay benefits to beneficiaries, we are going to have to borrow the money to redeem that IOU.

Essentially, they were able to argue that we were somehow extending the lifespan of Medicare at the very time these cuts were being made and also at the same time paying for a whole new entitlement program under ObamaCare. It was spending the same money twice. It was double-counting revenue—something which anywhere else in the country would probably land most Americans in jail.

That being said, these Medicare Advantage cuts are now having real-world impact—something we predicted all along.

The reason Medicare Advantage is a popular program and the reason one in two new beneficiaries is signing up is that it gives you options. It gives you choices. It provides competition, which is something we need to have more of, not less of, in health care today.

If you want to put downward pressure on prices, if you want to constrain utilization in health care, then create competition out there. Give people more ownership, more skin in the game. Give them some personal investment in their own health care decisions.

As it is, with the traditional Medicare Program we have a fee-for-service Medicare Program. Many seniors are enrolled in that. But Medicare Advantage gave them another option—an option that presented choices and opportunity to cover things they want to see covered in their health care plans. And it has worked. It has been an effective program, one that I think most people point to as a success.

So we are going to cut the very program that is working perhaps the best

out there in terms of meeting the health care needs of America's seniors in order to fund a whole new entitlement program, ObamaCare, and in the meantime end up with these higher premiums, canceled coverages, and all the dislocations that are coming as a result of these Medicare Advantage cuts to seniors across this country. That is the wrong way to approach this issue.

There is a much better way, one that relies more on the very things on which Medicare Advantage is based—more competition, more choice, more options—and wouldn't lead to canceled coverages, higher premiums, higher deductibles, and fewer doctors and hospitals to choose from for America's seniors. But that is exactly where we are, and American seniors are now experiencing the very thing a lot of other Americans have already experienced. People who get their insurance on the individual marketplace have seen a lot of these canceled coverages already. They have seen these huge increases in premiums.

Many of us have been here on the floor reading constituent mail and emails from families and individuals who have been adversely impacted and harmed by ObamaCare because of canceled coverage, higher premiums, higher deductibles, and loss of doctors and hospitals. We have seen this in the individual marketplace. We are starting to see this—and we will see more—in the small business, employer-provided marketplace.

But now, as of last week, the real impacts are being felt as well by seniors across this country who in big numbers have been signing up for Medicare Advantage. Close to 30 percent of all Medicare recipients—15 million seniors—as a result are going to see higher premiums and reduced access to health care because of the cuts that will occur to Medicare Advantage in order to pay for a new entitlement program, ObamaCare, which, based on the number of delays the administration has made, has already demonstrated it is not working. And I, as have many of my colleagues here, have argued for a long time that it can't work because it is built upon a faulty foundation.

There is a much better way to do this. We should do away with this approach, go back to the drawing board, and use a step-by-step approach to reforming health care in this country, realizing the status quo doesn't work but realizing as well that the best way to get lower costs, more affordable health care, and more accessible health care for more American citizens is to create downward pressure on prices. That requires giving people choices and creating competition in the marketplace. Those are the things we ought to be advocating and advancing rather than this top-down, government-knows-best, one-size-fits-all solution coming out of Washington, DC, which is hurting more and more Americans and most recently American citizens who are now experiencing the adverse impacts of

ObamaCare because of the cuts to their Medicare Advantage plans.

Madam President, I yield the floor, and I suggest the absence of a quorum.

The PRESIDING OFFICER (Ms. HEITKAMP). The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Ms. AYOTTE. Madam President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

IRAN

Ms. AYOTTE. Madam President, I come to the floor today to talk about a grave threat to the United States of America, a grave threat to the world, and a grave threat to our friend and ally, the State of Israel; that is, the threat of Iran's nuclear weapons program.

As we stand here today, pending has been legislation filed by Senator RICHARD BURR which contains important sanctions which are essentially an insurance policy to make sure that Tehran does not play the United States of America and that they are, in fact, serious about stopping their nuclear weapons program. Unfortunately, there is a long history with Iran where we talk and they enrich. This is why it is so important right now that we have this insurance policy.

These sanctions pending would only go in place if Iran violates the interim agreement that has been entered into between the administration and other countries in the world and Iran and if they fail to reach a final agreement that is acceptable to the security interests of the United States of America and to our allies in the region to make the world a safer place.

We cannot accept a nuclear-capable Iran. Why is that? Iran is a country that has threatened to wipe the State of Israel off the face of the Earth. Iran has called our country "the Great Satan." Iran is the world's worst state sponsor of terrorism. They have supported terrorist groups such as Hezbollah and Hamas. They have, unfortunately, obviously worked against our strong ally Israel. They have supported the murderous Assad regime, providing Assad arms so he can murder his own people.

Unfortunately, there are so many examples of the danger of Iran having nuclear weapons capability. If Iran gets this capability, unfortunately we will also find ourselves in a position where we are in a nuclear arms race in the Middle East, a Sunni-Shia arms race, which would then also threaten the world and make that region even more of a tinderbox.

So we now find ourselves at a critical moment. I am deeply worried that the sanctions regime this Congress has worked so hard to put in place on a strong bipartisan basis is unraveling and we need an insurance policy to make sure Iran knows they are not

going to play us and unravel these sanctions. The way we can do that is by having sanctions legislation passed which is prospective.

If Iran is serious about a nuclear weapons agreement that takes away their capability of having a nuclear weapon, then they should not have a problem with prospective sanctions by this Congress. Again, those sanctions would only go in place if they violate the interim agreement. If their words mean anything, then they shouldn't have a problem with the fact that we are just saying: If you violate it, we will impose additional sanctions. We will not allow this sanctions regime to unravel.

What is the significance of this sanctions regime? The work done by this Congress on a bipartisan basis and with our partners around the world is what has brought Iran to the table. All of us want a diplomatic resolution that stops Iran from having a nuclear weapon, but we need to go into this with clear eyes, which is why having this insurance policy is so important. A final agreement with Iran will only be meaningful if it ensures they will not have the ability to enrich because their ability to enrich makes it easier for them to immediately ramp up to nuclear weapons capability.

I recently attended a security conference in Munich and met with some representatives of the Arab nations. They were asked in an open forum: If an agreement is reached and Iran is allowed to enrich, what will the rest of you want to do? Their answer was that they will want the right to enrich too.

This final agreement must stop Iran's ability to enrich. If we do not stop them, we will not only face the risk of Iran being able to quickly ramp up to a nuclear weapon and its capability to harm the world but also the risk that the Arab nations themselves will also enrich. Even if they don't have a nuclear weapon capability, they are all right at the point where they could break out to that capability, and that is just as dangerous for the world.

The amendment we have makes it clear that we are going to protect the United States of America and protect our allies and the world. It has to be clear. It should prevent Iran from that enrichment capability. This agreement should stop their capability at the Arak facility to produce plutonium. Our agreement should absolutely make sure we are given access to their military facilities so we can stop them from their programs where they are working on weaponization of nuclear materials.

I serve on the Senate Armed Services Committee. The Director of National Intelligence and others have told us that by 2015 Iran could have ICBM capability. Can you imagine if they were to continue with this nuclear program and have ICBM capability? This is a true risk to the world.

An agreement is only meaningful if it is an agreement we can rely on, that is

open, transparent, verifiable, and absolutely stops them from having a nuclear program that could be a threat to the world. We need to make sure they stop enrichment and put a stop on the Arak plutonium reactor and weaponization program. We need full and open access.

We should be addressing Iran's acts of terrorism throughout the world. One of the grave dangers I worry about is that if Iran has a nuclear weapon, they may not use it, but they may pass it on to the terrorist groups that Iran is associated with, and that is a grave danger not only to our ally Israel but also to the United States of America.

One of the reasons I believe the sanctions legislation that is pending is so important is because some of the statements that have been made recently by the regime in Tehran are very troubling and harken back to their prior behavior of we talk, they enrich. We have to question how serious they are about a verifiable, transparent, and real agreement to stop their nuclear weapons program.

For example, on February 18—in talks between Iran and the P5+1 that were held in Vienna—Supreme Leader Ayatollah Ali Khamenei said the talks "will not lead anywhere." In advance of the talks, President Ruhani, whom Prime Minister Netanyahu has described as a wolf in sheep's clothing—and I would agree with him on that—has stated that peaceful atomic research would be pursued forever.

Iran's Foreign Minister recently clashed with a lead U.S. negotiator, Wendy Sherman, over the Arak and Fordow facilities. Sherman stated that Iran had no need for either facility. Make no mistake, if Iran is serious about giving up its nuclear weapons capability—or the pursuit of that capability—then she is absolutely right; there is no need for the Arak facility that allows them to produce plutonium. There is no need for these underground facilities such as Fordow, where they are trying to hide their program from the rest of the world.

The Foreign Minister of Iran, in reaction to her comments, described her statement as "worthless" and reinforced Iran's position that their ability to produce atomic energy at the plutonium reactor at Arak is not negotiable.

This is deeply troubling, and it is one of the reasons we need to send a clear message here and now. They came to the table because of sanctions. The sanctions were having a deteriorating effect on their economy. Yet recently we have seen—and this has been my fear—the sanctions regime unraveling. They are actually using this negotiation with the administration to further unravel those sanctions in order to get what they want without an insurance policy to ensure that we will get what we want, and that is what this sanction legislation does.

One of the issues that came up in February, a French trade delegation—representing 116 French companies—